

IN THE IOWA DISTRICT COURT IN AND FOR _____ COUNTY

Plaintiff(s), _____ (Name) _____ (Address) _____ (Name) _____ (Address) vs Defendant(s), _____ (Name) _____ (Address) _____ (Name) _____ (Address) Third Party Defendant(s), _____ (Name) _____ (Address) _____ (Name) _____ (Address)	SMALL CLAIMS DIVISION CROSS-PETITION AGAINST THIRD PARTY Small Claim No.: _____ Date Filed: _____
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TO _____, THIRD PARTY DEFENDANT(S):

YOU ARE HEREBY NOTIFIED that, _____, as cross-petitioner(s) demand(s) from you the amount of \$ _____ based on _____ (state briefly the basis for the demand).

THIS CASE HAS BEEN FILED IN A COUNTY THAT UTILIZES ELECTRONIC FILING. Therefore, unless you obtain an exemption from eFiling from the court, you must file your Appearance and Answer electronically. You must register to eFile through the Iowa Judicial Branch website at <https://www.iowacourts.state.ia.us/EFile> and obtain a log in and password for the purposes of filing and viewing documents on your case and of receiving service and notices from the court.

FOR GENERAL RULES AND INFORMATION ON ELECTRONIC FILING, REFER TO THE IOWA COURT RULES CHAPTER 16 PERTAINING TO THE USE OF THE ELECTRONIC DOCUMENT MANAGEMENT SYSTEM, also available on the Iowa Judicial Branch website.

FOR COURT RULES ON THE PROTECTION OF PERSONAL PRIVACY IN COURT FILINGS, REFER TO DIVISION VI OF IOWA COURT RULES CHAPTER 16.

UNLESS YOU APPEAR by completing and filing an Appearance and Answer using the Iowa Judicial Branch Electronic Filing Interface at <https://www.iowacourts.state.ia.us/EFile> within 20 days after service of this original notice upon you, judgment will be entered against you upon plaintiff's claim together with interest and court costs.

IF YOU DENY THE CLAIM AND APPEAR by filing an Appearance and Answer using the Iowa Judicial Branch Electronic Filing Interface within 20 days after service of this original notice upon you, you will then receive electronic notification through the Iowa Electronic Document Management System of the place and time assigned for hearing.

Signature: [Name] /s/ _____
 [Law firm] _____
 [Mailing Address] _____
 [Telephone Number] _____
 [E-mail Address] _____
 [Additional E-mail Address] _____

If you require the assistance of auxiliary aids or services to participate in court because of a disability, immediately call your district ADA coordinator (information at www.iowacourts.gov/Representing_Yourself/ADAAccess. If you are hearing impaired, call Relay Iowa TTY at 1-800-735-2942.